Case study - Functional Reactivation

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| 1. **Education** * Diagnose; support to understand diagnosis of CP and why it requires a management approach (rather than pain elimination or further medical interventions).
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| 2. A**ddress unhelpful beliefs** **and concerns/fears*** e.g. being more active is not harmful, hurt does not equal harm, pain flare up does not indicate more damage
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| 3.**Redirect focus to function*** Possible to live a full and meaningful life alongside managing pain
* Risks of not maintaining function
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| 4. **Identify functional deficits and valued activities** *Functional deficits:** “How is pain affecting your day?” (a picture of their day) -
* Self-care – Dressing, sleep, diet, exercise…
* Productive activity – work, housework, education, cooking, washing, gardening, shopping, …
* Leisure / social / family and friends

*What is important:* * “What do you want to do / need to do / value / care about the most?
* “If your pain was better managed how would your day be different?” “What is most important to you?”
* Steer to behaviors: If you ‘felt better’ what would you be do doing more of in the day?”
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| 5**. Highlight their ‘why’**“What would be the benefits to you of gradually returning to those tasks?”  |  |
| 6. S**et goals - keep it real** * Start with targets that are manageable with aim to gradually expand to longer-term goals
* Use of tools and outcome measures
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| 7. **Educate about managing activity** - PACING * Concept of pacing
* Range of strategies to pace
* Benefits of slowing down to achieve more
* *It’s not what you do, it’s how you go about it*
* Activity patterns – pros and cons
* Benefits of aiming for consistency
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| 8. **Identify realistic, consistently manageable routines*** Where are you at now?
* What’s missing?
* Use of diaries to identify patterns, needs, educate, to plan and review
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| 9. **Identify quotas, plan and do*** Useful for specific tasks or exercises
* Find the right starting point your starting point (Quota baseline)
* Can achieve on any day (regardless of pain state)
* Activity experiments (~5)
* Find baseline (start point = average amount less ~20%)
* Plan graded progression – ≤ 10-20%
* Consistency before progression
* Sets expectations
* Use of charts and diaries
* Begin with one activity and gradually add more as they get the concept
* Include use of other pain management skills e.g. mindfulness, breathing etc
* Review, problem solve, keep going
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| 10. **Validate and Encourage*** Ask how it’s going, explore barriers and help problem solve
* Encourage – flare ups and set backs are normal, try again.
* Use flare up plan
* Review the key points
* Activity management is hard
* Requires people to change behaviours and ways they have operated for a long time
* Takes time and repetition to make progress
* Expect progress may be slower than you want – stick with the plan
* Requires patience, perseverance
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| **11. Progress is measured by goals and engagement** * Validate pain experience and reiterate key messages to support that is ok to progress functionally
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| **12. Functional Reactivation IS treatment*** Provide consistent messages that validate pain experience and reassure that the work they are doing is evidence-based treatment
* Continue to encourage and guide towards improving capacity to engage in life
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